Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 Open to Public Inspection

Ā	For the	2012 calendar year, or tax year beginning and ending		_
В	Check if	C Name of organization	D Employer identification number	
_	applicable			
	Addres	wisconsin club for growth political fund		
	Name change	Doing Business As	45-2318439	
	Initial return	Number and street (or P 0. box if mail is not delivered to street address) Room/s		
Ĺ	Termin ated	1225 W MAIN 51	877-707-0571	_
Ļ	Amend	City, town, or post office, state, and ZIP code	G Gross receipts \$ 39,000	<u>.</u>
Ļ	Application pendin	DON FRAIRIE, WI 33330	H(a) Is this a group return	
		F Name and address of principal officer: ELEANORE C HAWLE!	for affiliates? Yes X N	
_		SAME AS C ABOVE	H(b) Are all affiliates included? Yes N	0
_		empt status: 501(c)(3) 501(c) () ◀ (Insert no.) 4947(a)(1) or X		
_		e: ► NONE organization: Corporation Trust Association X Other ► UNINC	H(c) Group exemption number ► Year of formation: 2011 M State of legal domicile. W	7
_	art I	organization:	Year of formation: 2011 M State of legal domicile.	<u> </u>
L		Briefly describe the organization's mission or most significant activities: WISCONS1	N CLUB FOR CROWTH	_
ce	1	POLITICAL FUND IS A SECTION 527 POLITICAL OF	GANIZATION THAT ENGAGES	_
Governance	2	Check this box If the organization discontinued its operations or disposed of		
ver	3	Number of voting members of the governing body (Part VI, line 1a)	3	0
ဗိ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
ري مح	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	0
/itie	6	Total number of volunteers (estimate if necessary)	6	0
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a C).
•	Ь	Net unrelated business taxable income from Form 990-T, line 34	7b C	•
			Prior Year Current Year	_
	8	Contributions and grants (Part VIII, line 1h)	738,500. 39,000	
enn	9	Program service revenue (Part VIII, line 2g)	1	<u>.</u>
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		<u>.</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		<u>.</u>
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	738,500. 39,000	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	· I	<u>) .</u>
		Benefits paid to or for members (Part IX, column (A), line 4)	I	<u>.</u>
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		<u>.</u>
Expenses	16a	Professional fundraising fees (Part X), doll mn (A), line 11e)	0.	<u>.</u>
Ě	- b	Total fundraising expenses (Part IX, column (D), line 25) 0.	737,350. 39,702	_
	17	Other expenses (Part IX) column (A), lines 11a-177, 11f-24e)	737,350. 39,702	
		Total expenses. Add lines 13-17 (must equal Pari) k, column (A), line 25)	1,150.	
75	ומי	Revenue less expenses⇒Subtract.line 18 from 12	Beginning of Current Year End of Year	
Net Assets or	20	Total assets (Part X, Ime 16)	1,150. 448	3.
ASS	21	Total liabilities (Part X, line 26)		<u>.</u>
ĭĕ.	22	Net assets or fund balances. Subtract line 21 from line 20	1,150. 448	3.
P	art II	Signature Block	<u> </u>	
Un	der pena	lities of perjury, I declare that I have examined this return, including accompanying schedules and s	tatements, and to the best of my knowledge and belief, it	IS
tru	e, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has any knowledge.	
		& Change of & Changes	7-31-2013	
Si	gn	Signature of difficer	Date 2	
Не	ere	ELEANORE C HAWLEY, ADMINISTRATOR		
_		Type or print name and title		_
_		Print/Type preparer's name WENDY R RICHARDS Trebaler's signature WENDY R RICHARDS	Date Check PTIN	
Pa			The same of the sa	
	eparer	Firm's name GODFREY & KAHN, S.C.	Firm's EIN > 39-1128206	
Us	e Only	Firm's address 780 NORTH WATER STREET	//////// 250/	`
_		MILWAUKEE, WI 53202-3590	Phone no. (414)273-3500	
Ma	ay the II	RS discuss this return with the preparer shown above? (see instructions)	X Yes	No

SCANNED AUG 1 3 2013

Form	990 (2012) WISCONSIN CLUB FOR GROWTH POLITICAL FUND 45-2318439 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
•	THE POLITICAL FUND IS A SECTION 527 POLITICAL ORGANIZATION THAT
	ENGAGES IN POLITICAL ACTIVITIES RELATED TO WISCONSIN PUBLIC POLICY.
	ENGAGES IN FORTITEED ACTIVITIES RELATED TO WISCONSTA TORSIC TORSICIA
2	Did the organization undertake any significant program services during the year which were not listed on
	the pnor Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
•	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code) (Expenses \$
	DIRECT AND INDIRECT POLITICAL ACTIVITIES IN WISCONSIN RELATING TO
	PUBLIC POLICIES TO PROMOTE ECONOMIC FREEDOM AND POLICIES THAT LEAD TO
	SUSTAINED ECONOMIC GROWTH, LIMITED GOVERNMENT, AND MINIMAL TAXATION.
4b	(Code) (Expenses \$
	16
4c	(Code) (Expenses \$) (Revenue \$)
	Other control of Orbital to Orbit
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ▶

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Form 990 (2012) WISCONSIN CL Part IV Checklist of Required Schedules

	, ,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	v	<u>X</u>
	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		Х	
_	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		
_	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			_
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	88		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	i		
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		х
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110		
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	ļ	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	-	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		x
	Schedule D, Parts XI and XII	12a		<u>^</u>
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			l
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	ļ	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	ł	ļ	١,,,
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	 	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 	 ^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18	1	x
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	- 10	 	+
19	complete Schedule G, Part III	19	1	x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	1
		Forn	990	(2012)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	21		х
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	-21		
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	22		х
00	column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			1
	Schedule J	23		х
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
240	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
а	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	<u> </u>	ł
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	1		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			1
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	}		,,
	Schedule N, Part II	32	-	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	١.		,,
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		\ _v	
	Part V, line 1	34	X	++
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	┼
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		+-
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	l		1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	.	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		\ v	
_	Note. All Form 990 filers are required to complete Schedule O	38	<u> X</u> ₁990	1
		Forn	า ษษป	1201

	Check if Schedule O contains a response to any question in this Part V			
	·		Yes	No
19	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	데		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
·	(gambling) winnings to prize winners?	1c		
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
28	filed for the calendar year ending with or within the year covered by this return 2a	o		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	7 2b		
J	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
22	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
70	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
h	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a				
	any contributions that were not tax deductible as charitable contributions?	6a	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b	Х]
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	? 7a		Ĺ
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	L	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_	ļ	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	ļ	<u> </u>
h		7 7h	<u> </u>	<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	1		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	ļ	.
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		├
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter	-		
а	Initiation fees and capital contributions included on Part VIII, line 12		}	
b	• • • • • • • • • • • • • • • • • • •			İ
11	Section 501(c)(12) organizations. Enter	- 1		
a			1	
b	`	- [
	amounts due or received from them.)	- 10-	1	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	+	-
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	\dashv		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120	╁──	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	+	1
	Note. See the instructions for additional information the organization must report on Schedule 0			
D	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13c	\dashv	1	
		14a	1	X
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	+	+
	in res, has it lieu a ruini 720 to report these payments on two, provide an explanation in schedule o		~ 000	(2012)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
-			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 0			
	If there are material differences in voting rights among members of the governing body, or if the governing	l		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	Ì	ĺ	
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	İ		
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
_	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a		Х
b	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			l
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	<u> </u>	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1	ļ	١
	taxable entity during the year?	16a	<u> </u>	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			ļ
	exempt status with respect to such arrangements?	16b	L	l
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılat	ie	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, are	d finai	ncial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza ELEANORE C HAWLEY - 877-707-0571	tion, 🗎		
23200		Form	990	(2012

orm 990 (2012)	WISCONSIN	CLUB	FOR	GROWTH	POLITICAL	FUND
2011 380 (2012)	"TDCCTIDITI	CDCD	- 011	011011111		

45-2318439

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization	(B)	Ji ya	111120			ipel	ısal	(D)	(E)	(F)
(A)		Position (do not check more than one						L		
Name and Title	Average	(do	not c	heck	more	than	one	Reportable	Reportable	Estimated
	hours per	offi	, unte: cer an	ss pe	rson Irecto	ıs bot or/trus	n an tee)	compensation	compensation	amount of other
	week	⊢—		, . 	Ţ		ΓĖ	from	from related	
	(list any	ᇗ	1		Į.	ł		the	organizations (W-2/1099-MISC)	compensation
	hours for	5	_ 	l	1	ated	ļ	organization	(44-27 1099-101150)	from the
	related	캻	trusti	İ		beus		(W-2/1099-MISC)	ĺ	organization
	organizations	al fr	onal		l š	5 g				and related
	below	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	트	Ę	8	<u>5</u>	포'등	횬			
(1) SEE SCHEDULE O	0.00	ļ	j		ļ	ļ			1	
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Form **990** (2012)

• (A) Name and title		Average hours per week (C) Average box, unless person is both an officer and a director/trustee)						h an	Reportable compensation from	Reportable compensation from related		am	(F) timate nount other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	,	comp fro orga and	pensa om th anızat d relat anızatı	e ion ed
											T			
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		-	1		ł		ŀ							
1b	Sub-total	<u> </u>	<u>i </u>	Ц.	L	<u>!</u>	┢	L	0.	1	0.			0.
С	Total from continuation sheets to Part V	/II, Section A							0.	j .	0.			0.
<u>d</u>	Total (add lines 1b and 1c) Total number of individuals (including but	not limited to th	2000			boy	(a) vv(ho r	0.	<u> </u>	0.			0.
	compensation from the organization	not intilled to ti	1036	1150	eu a	JOV	6) W	110 11	eceived more than \$100					0
•									h		Г		Yes	No
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for			e, K	эу е	mpi	oyee	, or	nignest compensated e	employee on		3		х
4	For any individual listed on line 1a, is the s	sum of reportat	ole c							the organization				
5	and related organizations greater than \$15 Did any person listed on line 1a receive or									udual for services	-	4		X
	rendered to the organization? If "Yes," con										_1	5	<u> </u>	х
Sec 1	tion B. Independent Contractors Complete this table for your five highest c	omposed in	don				traat	oro i	that reasoned more than	\$100,000 of nomp			from	
•	the organization Report compensation fo	-									01150	211011	110111	
	(A) Name and busines	o oddroop	NT.		тэ				(B) Description of	sonusos			C) ensatio	
	Name and busines	5 4001655		ON	<u>. </u>				Description of	Services	_	ompe	- Isauc	
														<u> </u>
		·												
2	Total number of independent contractors	-	not I	imite	ed to	o the	_	ste	d above) who received	more than				
	\$100,000 of compensation from the organ	nization >					0					Form	990	(2012)
														\~~ \C)

232008 12-10-12

			Check if Schedule O conta	ains a response	to any question in	n this Part VIII			
			STOCK II CONTOURING CO CONTRO			(A)	(B)	(C)	(D) Revenue excluded
						Total revenue	Related or exempt function	Unrelated business	I from fax under
							revenue	revenue	sections 512, 513, or 514
8 8	1.	_	Federated campaigns	1a					1
Earl			· ·	1b		ļ			
اع ق			Membership dues	1c					
ŢĘ			Fundraising events	 					
호밀			Related organizations	1d					
Sign			Government grants (contributi						1
풀힐	T		All other contributions, gifts, grant	1 1	39,000.				
유히			similar amounts not included abov		33,000.				
Contributions, Gifts, Grants and Other Similar Amounts		_	Noncash contributions included in lines	1a-1f \$		39,000.			Ì
2 8		1	Total. Add lines 1a-1f		D	33,000.		-	+
					Business Code				
ice	2 8								
Program Service Revenue	1	b							
n S		С			ļ. —				
ra Re	•	d							
roc	١ ١	е						<u></u> -	
a.			All other program service reve	nue					<u></u>
		_	Total. Add lines 2a-2f		<u> </u>				
	3		Investment income (including	dividends, inter	est, and				
			other similar amounts)					ļ	
	4		Income from investment of tax	x-exempt bond	oroceeds 🕨				-
	5		Royalties		>				-
				(ı) Real	(ii) Personal				
	6	а	Gross rents		_				
	'		Less: rental expenses						1
	1		Rental income or (loss)	L	L				
			Net rental income or (loss)		<u> </u>				
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory						
		b	Less cost or other basis						
			and sales expenses	-]	
	1	С	Gain or (loss)		<u> </u>				
		d	Net gain or (loss)		<u> </u>		<u> </u>		
ē	8	а	Gross income from fundraisin	g events (not					
venue	ł		including \$	of					
			contributions reported on line	1c) See					
e.			Part IV, line 18	a					
Other Re		b	Less direct expenses	t	·L				
			Net income or (loss) from fund						
	9	a	Gross income from gaming ad	ctivities. See					
			Part IV, line 19	ā	· [
	l	b	Less: direct expenses	t	·				
	1	С	Net income or (loss) from gan	ning activities		,			
	10	а	Gross sales of inventory, less	returns					
	l		and allowances	a a	1				
	1	b	Less: cost of goods sold	t t	·				
		c	Net income or (loss) from sale	es of inventory	>		<u> </u>		
			Miscellaneous Revenu		Business Code				
	11	a					<u> </u>		
	1	b							
		С							
		d	All other revenue						
		е	Total. Add lines 11a-11d		•				
	12		Total revenue. See instructions			39,000	·		
2320 12-1	09 0-12								Form 990 (2012

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	
	Check if Schedule O contains a respon		s Part IX	(C)	
	ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the			1	
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees			 	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	· · · · · · · · · · · · · · · · · · ·				
8	Other salaries and wages Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes			-	
11	Fees for services (non-employees):				····
	Management				
b	Legal	289.			
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	1 001	<u></u>		
13	Office expenses	1,991.			
14	Information technology				
15	Royalties				
16	Occupancy			 	
17	Travel		· · · · · · · · · · · · · · · · · · ·	 	
18	Payments of travel or entertainment expenses	 			
10	for any federal, state, or local public officials			<u> </u>	· · · · · · · · · · · · · · · · · · ·
19 20	Conferences, conventions, and meetings			 	
21	Payments to affiliates			 	
22	Depreciation, depletion, and amortization			1	
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	COMMUNICATIONS	37,422.			
b					
С					
d				<u> </u>	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	39,702.		ļ	
26	Joint costs. Complete this line only if the organization			1	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)			<u> </u>	l

Par	$\frac{\cdot}{\cdot}$	Check if Schedule O contains a response to any question in this Part X			
		Sinoth Solitoral Control of Contr	(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	1,150.	1	448.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined ur	nder		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contrib	uting		
		employers and sponsoring organizations of section 501(c)(9) voluntary			:
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
-	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	ь	Less. accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,150.	16	448.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustee	es,		Ţ.
iab		key employees, highest compensated employees, and disqualified person	s		
_		Complete Part II of Schedule L	<u> </u>	22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		[
		parties, and other liabilities not included on lines 17-24). Complete Part X of	of	1	
	1	Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
	}	Organizations that follow SFAS 117 (ASC 958), check here	and	ł	
es		complete lines 27 through 29, and lines 33 and 34.			
JLC	27	Unrestricted net assets		27	
Bal	28	Temporanly restricted net assets		28	
힏	29	Permanently restricted net assets		29	
Ē	1	Organizations that do not follow SFAS 117 (ASC 958), check here	<u>X</u>		
þ		and complete lines 30 through 34.	_		_
ets	30	Capital stock or trust principal, or current funds	0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	1,150.		448.
Z	33	Total net assets or fund balances	1,150.		448.
	34	Total liabilities and net assets/fund balances	1,150.	34	448.
					Form 990 (2012

Form **990** (2012)

orm	990 (2012) WISCONSIN CLUB FOR GROWTH POLITICAL FUND	45-2318	439	Pag	_{je} 12
Pai	rt XI Reconciliation of Net Assets			_	
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,0	
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	9,7	
3	Revenue less expenses Subtract line 2 from line 1	3			02.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,1	<u>50.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			-	
	_column (B))	10		4	48.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		_2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	e basis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	İ		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		_3a		X
b	If "Yes " did the organization undergo the required audit or audits? If the organization did not undergo the requ	ured audit			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

 Section 501(c)(4), (5), or (6) organizat 	ions: Complete Part III			
Name of organization			i	mployer identification number
WISCONS	IN CLUB FOR GROV	TH POLITICA	L FUND	45-2318439
Part I-A Complete if the org	anization is exempt und	der section 501(c)	or is a section 52	7 organization.
 Provide a description of the organiz Political expenditures Volunteer hours 	ation's direct and indirect politi	cal campaign activities		\$ 39,702.
Part I-B Complete if the org	anization is exempt un	der section 501(c)	(3).	
1 Enter the amount of any excise tax				S \$
2 Enter the amount of any excise tax	incurred by organization manag	gers under section 4955	; l	> \$
3 If the organization incurred a section	n 4955 tax, did it file Form 4720	of for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				
Part I-C Complete if the org	anization is exempt un	der section 501(c)	, except section 5	01(c)(3).
1 Enter the amount directly expended	by the filing organization for s	ection 527 exempt fund	tion activities	\$
2 Enter the amount of the filing organ	ization's funds contributed to c	ther organizations for s	ection 527	
exempt function activities			1	> \$
3 Total exempt function expenditures	Add lines 1 and 2. Enter here	and on Form 1120-POL	••	
line 17b				> \$
4 Did the filing organization file Form	1120-POL for this year?			Yes No
5 Enter the names, addresses and er made payments For each organiza contributions received that were pr political action committee (PAC) If	tion listed, enter the amount pa omptly and directly delivered to	aid from the filing organi a separate political org	zation's funds. Also ent janization, such as a se	er the amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization funds If none, enter	's contributions received and
		000 == 000 F7	S-b-d	In C /F 000 000 F7) 004

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

LHA

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Schedule C (Form 990 or 990-EZ) 2012 WI	SCONSIN C	LUB FOR GRO	WTH POLITICA	L FUN 45-	2318439 Page 2
Part II-A Complete if the organ	ization is exe	mpt under sectio	n 501(c)(3) and file	d Form 5768	
(election under section		.,		·	
A Check ► if the filing organization	belongs to an aff	iliated group (and list if	n Part IV each affiliated o	group member's nai	me, address, EIN,
expenses, and share o	f excess lobbying	expenditures)			
B Check ► if the filing organization	checked box A a	nd "limited control" pro	ovisions apply		
Limits o (The term "expenditu	on Lobbying Expe eres" means amo)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influen	ce public opinion	(grass roots lobbying)			-
b Total lobbying expenditures to influen	•		-		
c Total lobbying expenditures (add lines		dy (direct lobbying)	<u> </u>		
d Other exempt purpose expenditures	, ra una 15,				-
	add lines 1c and 1	d)	<u></u>		
e Total exempt purpose expenditures (a			th columns		
f Lobbying nontaxable amount Enter to					
If the amount on line 1e, column (a) or (b		obying nontaxable am			
Not over \$500,000		the amount on line 1e			•
Over \$500,000 but not over \$1,000,00		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,00	0,000 \$225,0	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000	,000			
g Grassroots nontaxable amount (enter	25% of line 1ft				
h Subtract line 1g from line 1a. If zero o			į		
i Subtract line 1f from line 1c If zero or			<u> </u>		-
j If there is an amount other than zero		r line 1; did the organia	L zation file Form 4720		
reporting section 4911 tax for this year	_	i line ii, did the organiz	241011 1110 1 01111 4720		Yes No
reporting section 4911 tax for this year		reraging Period Under	Section 501(h)		100100
	ons that made a	section 501(h) electio	n do not have to comp es 2a through 2f on pa		
	Lobbying Expe	enditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount		<u> </u>	<u> </u>	<u> </u>	
(150% of line 2a, column(e))					
c Total lobbying expenditures		ļ			
d Grassroots nontaxable amount		1			
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 WISCONSIN CLUB FOR GROWTH POLITICAL FUN 45-2318439 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For ea	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b)
	e lobbying activity	Yes	No	Amo	unt
а	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
С	Paid staff or management (include compensation in expenses reported on lines 1c through 1)? Media advertisements? Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?				
i	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
2a b	Total Add lines 1c through 1: Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
<u>d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	on 501(c)	(5), or se	ection	
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes	No
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?	504/	2 3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ion 501(c) d "No," O	(5), or se R (b) Par	ection t III-A, lir	ne 3, is
1 2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ıcal	1		
	expenses for which the section 527(f) tax was paid). Current year		2a		
c	Carryover from last year Total		2b 2c		
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?		4		
5 Par	Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information		5		
and I	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Fert II-B, line 1. Also, complete this part for any additional information RECT AND INDIRECT POLITICAL ACTIVITIES INCLUDE MED				-A, line 2,
DIS	SCUSSING PUBLIC ISSUES, PUBLIC OFFICIALS, AND CAND	IDATES	FOR P	UBLIC	-
OF	FICE.				
_	·				

Schedule C (Form 990 or 990-EZ) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization WISCONSIN CLUB FOR GROWTH POLITICAL FUND	Employer identification number 45-2318439
FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:	
UNINCORPORATED	
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MI	SSION:
IN POLITICAL ACTIVITIES RELATED TO WISCONSIN PUBLIC POLI	CY.
FORM 990, PART VI: WISCONSIN CLUB FOR GROWTH POLITICAL	
FUND IS A SECTION 527 POLITICAL ORGANIZATION THAT IS A R	ELATED ENTITY AND
SEGREGATED FUND OF WISCONSIN CLUB FOR GROWTH INC. SEE S	CHEDULE R. THE
POLITICAL FUND IS CONTROLLED AND MAINTAINED BY THE BOARD	OF DIRECTORS OF
WISCONSIN CLUB FOR GROWTH INC AND DOES NOT HAVE ITS OWN	BOARD.
FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO FILING T	HE FORM 990, THE
COMPLETED FORM WAS CIRCULATED AMONG THE BOARD OF WISCONS	IN CLUB FOR GROWTH
INC, WHICH OVERSEES THE WISCONSIN CLUB FOR GROWTH POLITI	CAL FUND, AND
DIRECTORS WERE GIVEN THE OPPORTUNITY TO COMMENT AND ASK	QUESTIONS ABOUT THE
FORM.	
FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS ARE NOT	P AVAILABLE.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▼ See separate instructions.

2012 Open to Public Inspection

OMB No 1545-0047

▶ Attach to Form 990.

Employer identification number 45-2318439

WISCONSIN CLUB FOR GROWTH POLITICAL FUND Name of the organization Department of the Treasury Internal Revenue Service

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

Part

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) End-of-year assets e Total income 9 Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part II

(g) Section 5 12(b)(13) ٥ × controlled entity? Yes Direct controlling entity Y/A Public charity status (if section 501(c)(3)) Exempt Code section 501(C)(4) ਉ Legal domicile (state or foreign country) ত WISCONSIN Primary activity SOCIAL WELFARE WISCONSIN CLUB FOR GROWTH INC - 11-3723921 Name, address, and EIN of related organization 53590 SUN PRAIRIE, WI 1223 W MAIN ST

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2012

45-2318439

Page 2

Schedule R (Form 990) 2012 WISCONSIN CLUB FOR GROWTH POLITICAL FUND

Part III Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year)

						9		-	3	8		3
(a) Name, address, and EIN	(b) Primary activity	Legal	olling	Predominan		(n) Share of total	(g) Share of		tion-	Code V-UBI		General or Percentage
of related organization		(state or foreign country)		(related, unrelated, excluded from tax under sections 512-514)	inrelated, m tax under 512-514)	income	end-of-year assets		No No	amount in box 20 of Schedule K-1 (Form 1065)		ownersnip
												1
									-,-			
						-		1	+			
	-							_				
					_							
											_	
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	ganizations Taxable a	is a Corpo	oration or Trust (Co	omplete if the	e organizatior	n answered "Y	es" to Form	990, Part I	/, line 34 t	because it had	one or mo	re related
(a)			(p)	(0)	Ð		(e)	3		(6)	Ð	
Name, address, and EIN	N.	Prim	ctivity	- icile	Direct controlling		Type of entity 8	Share of total			Percentage	512(b)(13) controlled
of related organizatio				foreign	מוווול) 	rust)			assets		eut
		i		conund)	;	-		ì	-			Yes
												
												
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				2,2					$\frac{1}{2}$	- Porto	0 0	0000
232162 12-10-12				77						Scheu	le n (rei	Schedule H (Form 990) ZU 12

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more in	elated organizations listed	ın Parts II:IV?	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a X
b Gift, grant, or capital contribution to related organization(s)				4b X
c Gift, grant, or capital contribution from related organization(s)				1c X
				- P
				×
 Loans or loan guarantees by related organization(s) 				
f Dividends from related organization(s)				↓
g Sale of assets to related organization(s)				1g X
				th X
				# X
i Losso of facilities equipment or other assets to related organization(s)				×
ן בפספר כו ומכוווניפט, פקטוף ופרוני, כו כונופן מסספנט נכ ופומנפט כו שמיוובמינטיו(ס)				
k Lease of facilities, equipment, or other assets from related organization(s)				* X
I Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			× =
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			T X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			Th X
o Sharing of paid employees with related organization(s)				10 X
p Reimbursement paid to related organization(s) for expenses				1p X
q Reimbursement paid by related organization(s) for expenses				1q X
r Other transfer of cash or property to related organization(s)				1r X
s Other transfer of cash or property from related organization(s)				1s X
1	who must complete t	his line, including covered	relationships and transaction thresholds	
	(4)	10)	(P)	
(a) Name of other organization	(b) Transaction type (a-s)	Amount involved	Method of determining amount involved	ınvolved
(1)				
(2)				
(3)		1		
(4)				
(c)				
(9)				
232163 12-10-12	23		Schedu	Schedule R (Form 990) 2012

Schedule R (Form 990) 2012 WISCONSIN CLUB FOR GROWTH POLITICAL FUND

Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

UBI General or Percentage nox 20 managing le K-1 partner 2055) Yes No					
(h) (i) Disprapar- Code V-UBI Gode Dox 20 in allocations? of Schedule K-1 1s Yes No (Form 1065) y					
(g) Share of end-of-year assets					
(f) Share of total Income	ſ				
(e) Are all partners sec 501(c)(3) orgs A) Yes No				,,	
Predominant income Areall Predominant income (related, unrelated, 501(c)(3) excluded from tax under section 512-514) res No					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					1
(a) (b) (c) (d) (d) (d) (e) (e) (d) (d) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e					

Schedule R	l (Form 990) 2012	WISCONSIN	CLUB	FOR	GROWTH	POLITICAL	FUND45-2318439	Page 5
Part VII	(Form 990) 2012 Supplemental Info	rmation						
+	Complete this part to pro	ovide additional inform	nation for r	respons	es to question:	s on Schedule R (se	e instructions).	
	Complete this part to pre	ovide additional inform	1011011	оороло	oo to quotion	0 011 0011000111 11 (00		
								
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